

**Fill in this information to identify the case:**

United States Bankruptcy Court for the:

Northern District Of Indiana

(State)

Case number (if known): \_\_\_\_\_ Chapter 7☐ Check if this is an amended filing

## Official Form 201

**Voluntary Petition for Non-Individuals Filing for Bankruptcy**

04/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Shaver Motors of Allen County, Inc.

2. All other names debtor used in the last 8 years JOHN SHAVER MITSUBISHI; SHAVER AUTOS; SHAVER FORD;  
SHAVER IMPORT; SHAVER IMPORTS  
 Include any assumed names, trade names, and *doing business* as names \_\_\_\_\_

3. Debtor's federal Employer Identification Number (EIN) 3 5 - 1 8 3 0 5 1 6

4. Debtor's address	Principal place of business	Mailing address, if different from principal place of business
	<u>1726 Prestwick Lane</u>	_____
	Number Street	Number Street
	_____	_____
	<u>Fort Wayne</u> <u>IN</u> <u>46814</u>	P.O. Box _____
	City State ZIP Code	City State ZIP Code
	<u>ALLEN</u>	Location of principal assets, if different from principal place of business
	County	_____
		Number Street
		_____
		City State ZIP Code

5. Debtor's website (URL) \_\_\_\_\_

6. Type of debtor ☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))  
☐ Partnership (excluding LLP)  
☐ Other. Specify: \_\_\_\_\_

Debtor Shaver Motors of Allen County, Inc.  
Name

Case number (if known) \_\_\_\_\_

**11. Why is the case filed in this district?**

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**

- ☒ No
- ☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention?** (Check all that apply.)

- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.  
What is the hazard? \_\_\_\_\_
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other \_\_\_\_\_

**Where is the property?** \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Is the property insured?**

- ☐ No
- ☐ Yes. Insurance agency \_\_\_\_\_
- Contact name \_\_\_\_\_
- Phone \_\_\_\_\_

**Statistical and administrative information****13. Debtor's estimation of available funds**

Check one:

- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

**14. Estimated number of creditors**

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input type="checkbox"/> 50-99           | <input type="checkbox"/> 5,001-10,000  | <input type="checkbox"/> 50,001-100,000    |
| <input type="checkbox"/> 100-199         | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999         |  |  |

**15. Estimated assets**

- |  |  |  |
|--|--|--|
| <input checked="" type="checkbox"/> \$0-\$50,000 | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000      | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input type="checkbox"/> \$100,001-\$500,000     | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million   | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

Debtor Shaver Motors of Allen County, Inc.  
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## 16. Estimated liabilities

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> \$0-\$50,000                     | <input type="checkbox"/> \$1,000,001-\$10 million    | <input type="checkbox"/> \$500,000,001-\$1 billion     |
| <input type="checkbox"/> \$50,001-\$100,000               | <input type="checkbox"/> \$10,000,001-\$50 million   | <input type="checkbox"/> \$1,000,000,001-\$10 billion  |
| <input type="checkbox"/> \$100,001-\$500,000              | <input type="checkbox"/> \$50,000,001-\$100 million  | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input checked="" type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion        |

**Request for Relief, Declaration, and Signatures**

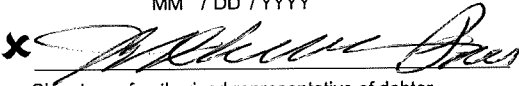
**WARNING --** Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## 17. Declaration and signature of authorized representative of debtor

- ☐ The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- ☐ I have been authorized to file this petition on behalf of the debtor.
- ☐ I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 07 10 2017  
MM / DD / YYYY

**x**   
Signature of authorized representative of debtor

John B. Shaver

Printed name

Title President

## 18. Signature of attorney

**x**   
Signature of attorney for debtor

Date 07 10 2017  
MM / DD / YYYYAdam L. Hand

Printed name

Beckman Lawson, LLP

Firm name

201 W. Wayne Street

Number Street

Fort Wayne

City

IN

State

46802

ZIP Code

(260) 422-0800

Contact phone

ahand@beckmanlawson.com

Email address

25620-02

Bar number

IN

State

**Fill in this information to identify the case:**

Debtor name Shaver Motors of Allen County, Inc.

United States Bankruptcy Court for the: Northern District of Indiana

Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206A/B

**Schedule A/B: Assets — Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
- ☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

**2. Cash on hand**

\$ 0.00

**3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. PNC

Checking

3 1 6 8

\$ 100.00

3.2. \_\_\_\_\_ \$ \_\_\_\_\_

**4. Other cash equivalents (Identify all)**

4.1. \_\_\_\_\_ \$ \_\_\_\_\_

4.2. \_\_\_\_\_ \$ \_\_\_\_\_

**5. Total of Part 1**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$ 100.00

**Part 2: Deposits and prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
- ☐ Yes. Fill in the information below.

Current value of debtor's interest

**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. \_\_\_\_\_ \$ \_\_\_\_\_

7.2. \_\_\_\_\_ \$ \_\_\_\_\_

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Case number (if known) \_\_\_\_\_

**8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

8.1. \_\_\_\_\_ \$ \_\_\_\_\_

8.2. \_\_\_\_\_ \$ \_\_\_\_\_

**9. Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$ \_\_\_\_\_

**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.
- ☐ Yes. Fill in the information below.

Current value of debtor's  
interest**11. Accounts receivable**

11a. 90 days old or less: \_\_\_\_\_ = ..... → \$ \_\_\_\_\_  
face amount doubtful or uncollectible accounts

11b. Over 90 days old: \_\_\_\_\_ = ..... → \$ \_\_\_\_\_  
face amount doubtful or uncollectible accounts

**12. Total of Part 3**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$ \_\_\_\_\_

**Part 4: Investments****13. Does the debtor own any investments?**

- ☒ No. Go to Part 5.
- ☐ Yes. Fill in the information below.

Valuation method  
used for current valueCurrent value of debtor's  
interest**14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

14.1. \_\_\_\_\_ \$ \_\_\_\_\_

14.2. \_\_\_\_\_ \$ \_\_\_\_\_

**15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture**

Name of entity:

% of ownership:

15.1. \_\_\_\_\_ % \_\_\_\_\_ \$ \_\_\_\_\_

15.2. \_\_\_\_\_ % \_\_\_\_\_ \$ \_\_\_\_\_

**16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**

Describe:

16.1. \_\_\_\_\_ \$ \_\_\_\_\_

16.2. \_\_\_\_\_ \$ \_\_\_\_\_

**17. Total of Part 4**

Add lines 14 through 16. Copy the total to line 83.

\$ \_\_\_\_\_

Debtor

Shaver Motors of Allen County, Inc.

Name

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**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
- ☐ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
20. Work in progress				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
21. Finished goods, including goods held for resale				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
22. Other inventory or supplies				
_____	MM / DD / YYYY	\$ _____	_____	\$ _____
23. Total of Part 5				\$ _____
Add lines 19 through 22. Copy the total to line 84.				

24. Is any of the property listed in Part 5 perishable?

- ☐ No
- ☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

- ☐ No
- ☐ Yes. Book value \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \_\_\_\_\_

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

- ☐ No
- ☐ Yes

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
- ☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested			
_____	\$ _____	_____	\$ _____
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish			
_____	\$ _____	_____	\$ _____
30. Farm machinery and equipment (Other than titled motor vehicles)			
_____	\$ _____	_____	\$ _____
31. Farm and fishing supplies, chemicals, and feed			
_____	\$ _____	_____	\$ _____
32. Other farming and fishing-related property not already listed in Part 6			
_____	\$ _____	_____	\$ _____

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Name

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**33. Total of Part 6.**

Add lines 28 through 32. Copy the total to line 85.

\$ \_\_\_\_\_

**34. Is the debtor a member of an agricultural cooperative?**

- ☐ No
- ☐ Yes. Is any of the debtor's property stored at the cooperative?
- ☐ No
- ☐ Yes

**35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?**

- ☐ No
- ☐ Yes. Book value \$ \_\_\_\_\_ Valuation method \_\_\_\_\_ Current value \$ \_\_\_\_\_

**36. Is a depreciation schedule available for any of the property listed in Part 6?**

- ☐ No
- ☐ Yes

**37. Has any of the property listed in Part 6 been appraised by a professional within the last year?**

- ☐ No
- ☐ Yes

**Part 7: Office furniture, fixtures, and equipment; and collectibles****38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☐ No. Go to Part 8.
- ☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
<b>39. Office furniture</b>			
Office Furniture	\$ 200.00		\$ 200.00
<b>40. Office fixtures</b>			
	\$ _____		\$ _____
<b>41. Office equipment, including all computer equipment and communication systems equipment and software</b>			
	\$ _____		\$ _____
<b>42. Collectibles</b> Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
42.1 _____	\$ _____		\$ _____
42.2 _____	\$ _____		\$ _____
42.3 _____	\$ _____		\$ _____

**43. Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$ 200.00

**44. Is a depreciation schedule available for any of the property listed in Part 7?**

- ☒ No
- ☐ Yes

**45. Has any of the property listed in Part 7 been appraised by a professional within the last year?**

- ☒ No
- ☐ Yes

Debtor

Shaver Motors of Allen County, Inc.

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**Part 8: Machinery, equipment, and vehicles****46. Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☐ No. Go to Part 9.
- ☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
<b>47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles</b>			
47.1 <u>Work Van</u>	\$ <u>500.00</u>		\$ <u>500.00</u>
47.2 _____	\$ _____		\$ _____
47.3 _____	\$ _____		\$ _____
47.4 _____	\$ _____		\$ _____
<b>48. Watercraft, trailers, motors, and related accessories</b> Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1 _____	\$ _____		\$ _____
48.2 _____	\$ _____		\$ _____
<b>49. Aircraft and accessories</b>			
49.1 _____	\$ _____		\$ _____
49.2 _____	\$ _____		\$ _____
<b>50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)</b>			
_____	\$ _____		\$ _____

**51. Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

**\$ 500.00****52. Is a depreciation schedule available for any of the property listed in Part 8?**

- ☒ No
- ☐ Yes

**53. Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- ☒ No
- ☐ Yes



Debtor

Shaver Motors of Allen County, Inc.

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**Part 9: Real property****54. Does the debtor own or lease any real property?**☒ No. Go to Part 10.☐ Yes. Fill in the information below.**55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1		\$		\$
55.2		\$		\$
55.3		\$		\$
55.4		\$		\$
55.5		\$		\$
55.6		\$		\$

**56. Total of Part 9.**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$

**57. Is a depreciation schedule available for any of the property listed in Part 9?**☐ No☐ Yes**58. Has any of the property listed in Part 9 been appraised by a professional within the last year?**☐ No☐ Yes**Part 10: Intangibles and Intellectual Property****59. Does the debtor have any interests in intangibles or intellectual property?**☒ No. Go to Part 11.☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets	\$		\$
61. Internet domain names and websites	\$		\$
62. Licenses, franchises, and royalties	\$		\$
63. Customer lists, mailing lists, or other compilations	\$		\$
64. Other intangibles, or intellectual property	\$		\$
65. Goodwill	\$		\$

**66. Total of Part 10.**

Add lines 60 through 65. Copy the total to line 89.

\$

Debtor Shaver Motors of Allen County, Inc.  
Name

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67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☐ No  
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☐ No  
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☐ No  
☐ Yes

**Part 11: All other assets**

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.  
☐ Yes. Fill in the information below.

Current value of  
debtor's interest

71. Notes receivable

Description (include name of obligor)

_____	_____	_____	= →	\$ _____
	Total face amount	doubtful or uncollectible amount		

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____
_____	Tax year _____	\$ _____

73. Interests in insurance policies or annuities

_____	\$ _____
-------	----------

74. Causes of action against third parties (whether or not a lawsuit has been filed)

Nature of claim \_\_\_\_\_

Amount requested \$ \_\_\_\_\_

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

Nature of claim \_\_\_\_\_

Amount requested \$ \_\_\_\_\_

76. Trusts, equitable or future interests in property

_____	\$ _____
-------	----------

77. Other property of any kind not already listed *Examples: Season tickets, country club membership*

_____	\$ _____
-------	----------

_____	\$ _____
-------	----------

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$ _____
----------

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☐ No  
☐ Yes

Debtor

Shaver Motors of Allen County, Inc.

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Case number (if known)

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	\$100.00	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$0.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment, and collectibles. <i>Copy line 43, Part 7.</i>	\$200.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$500.00	
88. Real property. <i>Copy line 56, Part 9.</i> .....	→	\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. Total. Add lines 80 through 90 for each column. ....91a.	\$800.00	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92. ....	\$800.00	

## Fill in this information to identify the case:

Debtor name Shaver Motors of Allen County, Inc.  
 United States Bankruptcy Court for the: Northern District of Indiana  
 Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

## 1. Do any creditors have claims secured by debtor's property?

- ☒ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.  
☐ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims**

## 2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A

Amount of claim

Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

**2.1** Creditor's name

Describe debtor's property that is subject to a lien

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- ☐ No  
☐ Yes. Specify each creditor, including this creditor, and its relative priority.

Describe the lien

Is the creditor an insider or related party?

- ☐ No  
☐ Yes

Is anyone else liable on this claim?

- ☐ No  
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**2.2** Creditor's name

Describe debtor's property that is subject to a lien

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

- ☐ No  
☐ Yes. Have you already specified the relative priority?  
☐ No. Specify each creditor, including this creditor, and its relative priority.

- ☐ Yes. The relative priority of creditors is specified on lines \_\_\_\_\_

Describe the lien

Is the creditor an insider or related party?

- ☐ No  
☐ Yes

Is anyone else liable on this claim?

- ☐ No  
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H).

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

## 3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$0.00

## Fill in this information to identify the case:

Debtor Shaver Motors of Allen County, Inc.

United States Bankruptcy Court for the: Northern District of Indiana

Case number \_\_\_\_\_  
(If known)

☐ Check if this is an amended filing

## Official Form 206E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
- ☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
<b>2.1</b> Priority creditor's name and mailing address Indiana Department of Revenue 100 N. Senate Avenue, #111 Indianapolis, IN 46204  Date or dates debt was incurred  Last 4 digits of account number <u>0 5 1 6</u>  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) ( <u>8</u> )	As of the petition filing date, the claim is: <u>\$41,674.58</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Taxes and Other Government Debts</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$41,674.58</u>

<b>2.2</b> Priority creditor's name and mailing address    Date or dates debt was incurred  Last 4 digits of account number _____  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)	As of the petition filing date, the claim is: \$ _____ <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim:  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ _____
---	---	----------

<b>2.3</b> Priority creditor's name and mailing address    Date or dates debt was incurred  Last 4 digits of account number _____  Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (____)	As of the petition filing date, the claim is: \$ _____ <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim:  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ _____
---	---	----------

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 4 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	<b>Nonpriority creditor's name and mailing address</b> <u>AEP Indiana Michigan Power</u> <u>See Attachment 1</u> <u>Renton, WA 98057</u>  <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>2 0 4 2</u>	<b>As of the petition filing date, the claim is:</b> \$ <u>1,088.98</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2	<b>Nonpriority creditor's name and mailing address</b> <u>AFC Automotive Financial Corp.</u> <u>11115 Industriplex Blvd., Ste. 400</u> <u>Baton Rouge, LA 70809</u>  <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>4 1 8 8</u>	<b>As of the petition filing date, the claim is:</b> \$ <u>50,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.3	<b>Nonpriority creditor's name and mailing address</b> <u>American Express</u> <u>P.O. Box 650448</u> <u>Dallas, TX 75265-0448</u>  <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>6 0 0 4</u>	<b>As of the petition filing date, the claim is:</b> \$ <u>32,800.76</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.4	<b>Nonpriority creditor's name and mailing address</b> <u>AmTrust North American</u> <u>P.O. Box 93833</u> <u>Cleveland, OH 44101</u>  <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>6 - 0 3</u>	<b>As of the petition filing date, the claim is:</b> \$ <u>1.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5	<b>Nonpriority creditor's name and mailing address</b> <u>Bank of America</u> <u>P.O. Box 851001</u> <u>Dallas, TX 75285-1001</u>  <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>2 0 7 1</u>	<b>As of the petition filing date, the claim is:</b> \$ <u>48,755.59</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6	<b>Nonpriority creditor's name and mailing address</b> <u>Carfax</u> <u>c/o Barr Credit Service 5151 E. Broadway Blvd., Suite 800</u> <u>Tucson, AZ 85711</u>  <b>Date or dates debt was incurred</b> _____ <b>Last 4 digits of account number</b> <u>7 0 0 0</u>	<b>As of the petition filing date, the claim is:</b> \$ <u>3,645.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.7	<p>Nonpriority creditor's name and mailing address</p> <p>Cars.com</p> <p>c/o Classified Ventures, LLC 2631 Solution Center Drive</p> <p>Chicago, IL 60677-2006</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number 3 9 1 1</p>	<p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p><input type="checkbox"/> Liquidated and neither contingent nor disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$ 1,000.00</p>
3.8	<p>Nonpriority creditor's name and mailing address</p> <p>Cross Sell, LLC</p> <p>c/o Credit Bureau Syssems, Inc. P.O. Box 11788</p> <p>Lexington, KY 40578-1788</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number 9 7 0 8</p>	<p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$ 150.00</p>
3.9	<p>Nonpriority creditor's name and mailing address</p> <p>Discover</p> <p>P.O. Box 6103</p> <p>Carol Stream, IL 60197-6103</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number 1 6 9 1</p>	<p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$ 13,058.37</p>
3.10	<p>Nonpriority creditor's name and mailing address</p> <p>DSC-Nextgear</p> <p>c/o Michael G. Gibson, Esq. 320 City Center Cr., Suite 100</p> <p>Carmel, IN 46032</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number 3 6 5 4</p>	<p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$ 399,125.13</p>
3.11	<p>Nonpriority creditor's name and mailing address</p> <p>Fort Wayne Newspaper</p> <p>P.O. Box 74059</p> <p>Cincinnati, OH 45274-0509</p> <p>Date or dates debt was incurred</p> <p>Last 4 digits of account number 9 0 2 6</p>	<p>As of the petition filing date, the claim is:</p> <p>Check all that apply.</p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim:</p> <p>Is the claim subject to offset?</p> <p><input checked="" type="checkbox"/> No</p> <p><input type="checkbox"/> Yes</p>	<p>\$ 15,989.00</p>



**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.12	<b>Nonpriority creditor's name and mailing address</b> Gateway One Lending & Finance  160 N. Riverview Dr., Suite 100 Anaheim, CA 92808  Date or dates debt was incurred _____ Last 4 digits of account number <u>8 5 8 0</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1.00
3.13	<b>Nonpriority creditor's name and mailing address</b> Hires Automotive Center  1620 Northland Blvd. Fort Wayne, IN 46825  Date or dates debt was incurred _____ Last 4 digits of account number <u>3 4 0 1</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 14,417.95
3.14	<b>Nonpriority creditor's name and mailing address</b> Indiana Secretary of State  302 W. Washington St. Indianapolis, IN 46204  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 17,850.00
3.15	<b>Nonpriority creditor's name and mailing address</b> JRM Realty  5612 Illinois Road Fort Wayne, IN 46804  Date or dates debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 36,000.00
3.16	<b>Nonpriority creditor's name and mailing address</b> Juniper  Business Card Services P.O. Box 23066 Columbus, GA 31902-3066  Date or dates debt was incurred _____ Last 4 digits of account number <u>5 0 0 4</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> _____  <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 26,745.07



Debtor

Shaver Motors of Allen County, Inc.  
Name

Case number (if known)

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.17	Nonpriority creditor's name and mailing address Kapp's Landscaping  4124 Clubview Dr. Fort Wayne, IN 46804  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 781.04
3.18	Nonpriority creditor's name and mailing address Koehlinger Kruse  1441 Wells Street Fort Wayne, IN 46818  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 108.00
3.19	Nonpriority creditor's name and mailing address KPC Media  P.O. Box 39 Kendallville, IN 46755  Date or dates debt was incurred _____ Last 4 digits of account number <u>6 7 0 9</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 604.53
3.20	Nonpriority creditor's name and mailing address MBPI Vehicle Protection, Inc.  250 NE Mulberry Lee's Summit, MO 64086  Date or dates debt was incurred _____ Last 4 digits of account number <u>2 0 0 3</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 41,574.00
3.21	Nonpriority creditor's name and mailing address Mickey's Linen & Towel Supply  4601 W. Addison St., Ste. 500 Chicago, IL 60641-3702  Date or dates debt was incurred _____ Last 4 digits of account number <u>2 1 0 7</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 242.56

Debtor

Shaver Motors of Allen County, Inc.  
Name

Case number (if known)

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.22	Nonpriority creditor's name and mailing address Office Depot  Office Depot Card Plan P.O. Box 689020 Des Moines, IA 50368-9020  Date or dates debt was incurred _____ Last 4 digits of account number <u>3 0 0 0</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 575.85
3.23	Nonpriority creditor's name and mailing address Protective/Asset Protection  2345 Waukegan Road Suite 210 Bannoeburn, IL 60015  Date or dates debt was incurred _____ Last 4 digits of account number <u>3 8 9 8</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,546.00
3.24	Nonpriority creditor's name and mailing address Ridge Co. Automotive Group  630 Avenue of Autos Fort Wayne, IN 46804  Date or dates debt was incurred _____ Last 4 digits of account number <u>1 9 4 1</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 717.40
3.25	Nonpriority creditor's name and mailing address Speedway Auto Care  219 W. Collins Road Fort Wayne, IN 46825  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 3,500.00
3.26	Nonpriority creditor's name and mailing address Stelzer's Mobile Power  P.O. Bo 10252 Fort Wayne, IN 46851  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 3,074.50

Debtor

Shaver Motors of Allen County, Inc.

Case number (if known)

Name

**Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.27	Nonpriority creditor's name and mailing address Summit City Auto Glass  P.O. Box 15204 Fort Wayne, IN 46885-5204  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input type="checkbox"/> Liquidated and neither contingent nor disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,535.00
3.28	Nonpriority creditor's name and mailing address vAuto/Auto Traders  c/o Jonathan Neil & Associates 71 West Main St., Suite 304 Freehold, NJ 07228  Date or dates debt was incurred _____ Last 4 digits of account number 4 4 7 9	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 7,526.47
3.29	Nonpriority creditor's name and mailing address Vernon General Insurance  P.O. Box 770 Deerfield, IL 60015  Date or dates debt was incurred _____ Last 4 digits of account number 0 2 0 7	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$ 1,777.00
3.30	Nonpriority creditor's name and mailing address _____ _____ _____  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ _____
3.31	Nonpriority creditor's name and mailing address _____ _____ _____  Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: _____  Is the claim subject to offset? <input type="checkbox"/> No <input type="checkbox"/> Yes	\$ _____

Debtor

Shaver Motors of Allen County, Inc.  
Name

Case number (if known) \_\_\_\_\_

**Part 3:****List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.2. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.3. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.4. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.5. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.6. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.7. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.8. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.9. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.10. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.11. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _
4.12. _____ _____	Line _____ <input type="checkbox"/> Not listed. Explain _____	____ _

Debtor Shaver Motors of Allen County, Inc. Case number (if known) \_\_\_\_\_  
Name

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1 5a. \$41,674.58

5b. Total claims from Part 2 5b. + \$724,190.20

5c. Total of Parts 1 and 2 5c. \$765,864.78  
Lines 5a + 5b = 5c.

Attachment  
Debtor: Shaver Motors of Allen County, Inc. Case No:

**Attachment 1**

**c/o Convergent 800300 30th St.  
P.O. Box 9004**

Fill in this information to identify the case:

Debtor name Shaver Motors of Allen County, Inc.

United States Bankruptcy Court for the: Northern District of Indiana

Case number (if known): \_\_\_\_\_ Chapter 7

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?
- ☒ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.2	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.3	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.4	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.5	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		

**Fill in this information to identify the case:**Debtor name Shaver Motors of Allen County, Inc.United States Bankruptcy Court for the: Northern District of Indiana

Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206H

**Schedule H: Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Does the debtor have any codebtors?**

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

**Column 1: Codebtor****Column 2: Creditor****Name****Mailing address****Name***Check all schedules that apply:*

2.1	<u>John B. Shaver</u>	<u>1726 Prestwick Lane</u> Street	<u>Indiana Department</u> of Revenue	<input type="checkbox"/> D <input checked="" type="checkbox"/> E/F <input type="checkbox"/> G
		<u>Fort Wayne</u> <u>IN</u> <u>46814</u> City                      State              ZIP Code	See Attachment 1	

2.2	_____	_____ Street	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		_____ City                      State              ZIP Code		

2.3	_____	_____ Street	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		_____ City                      State              ZIP Code		

2.4	_____	_____ Street	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		_____ City                      State              ZIP Code		

2.5	_____	_____ Street	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		_____ City                      State              ZIP Code		

2.6	_____	_____ Street	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
		_____ City                      State              ZIP Code		



Attachment

Debtor: Shaver Motors of Allen County, Inc.

Case No:

Attachment 1

AFC Automotive Financial Corp., Schedule E/F  
American Express, Schedule E/F  
Bank of America, Schedule E/F  
Carfax, Schedule E/F  
Cars.com, Schedule E/F  
DSC-Nextgear, Schedule E/F  
Fort Wayne Newspaper, Schedule E/F  
Hires Automotive Center, Schedule E/F  
JRM Realty, Schedule E/F  
Juniper, Schedule E/F  
KPC Media, Schedule E/F  
MBPI Vehicle Protection, Inc., Schedule E/F  
Stelzer's Mobile Power, Schedule E/F  
Summit City Auto Glass, Schedule E/F

**Fill in this information to identify the case:**Debtor name Shaver Motors of Allen County, Inc.United States Bankruptcy Court for the: Northern District of Indiana

Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206Sum

**Summary of Assets and Liabilities for Non-Individuals**

12/15

**Part 1: Summary of Assets**1. **Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)1a. **Real property:**Copy line 88 from *Schedule A/B* .....\$ 0.001b. **Total personal property:**Copy line 91A from *Schedule A/B* .....\$ 800.001c. **Total of all property:**Copy line 92 from *Schedule A/B* .....\$ 800.00**Part 2: Summary of Liabilities**2. **Schedule D: Creditors Who Hold Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, at the bottom of page 1 of *Schedule D* .....\$ 0.003. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)3a. **Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 6a of *Schedule E/F* .....\$ 41,674.583b. **Total amount of claims of non-priority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 6b of *Schedule E/F* .....+ \$ 724,190.204. **Total liabilities** .....

Lines 2 + 3a + 3b

\$ 765,864.78

**Fill in this information to identify the case and this filing:**

Debtor Name Shaver Motors of Allen County, Inc.  
 United States Bankruptcy Court for the: Northern District Of Indiana  
 Case number (if known): \_\_\_\_\_

**Official Form 202****Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

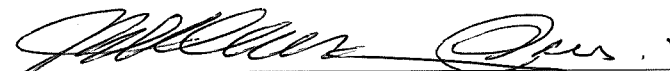
I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206—Summary)
- ☐ Amended Schedule \_\_\_\_\_
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

7/10/17  
MM / DD / YYYY

**x**   
 Signature of individual signing on behalf of debtor

John B. Shaver

Printed name

President

Position or relationship to debtor

**Fill in this information to identify the case:**

Debtor name Shaver Motors of Allen County, Inc.

United States Bankruptcy Court for the: Northern District of Indiana

Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business**

☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue  
Check all that apply

Gross revenue  
(before deductions and exclusions)

From the beginning of the fiscal year to filing date: From 01/01/2017 to Filing date  
MM / DD / YYYY

☐ Operating a business

\$ 0.00

☐ Other \_\_\_\_\_

For prior year: From 01/01/2016 to 12/31/2016  
MM / DD / YYYY MM / DD / YYYY

☒ Operating a business

\$ 3,415,924.00

☐ Other \_\_\_\_\_

For the year before that: From 01/01/2015 to 12/31/2015  
MM / DD / YYYY MM / DD / YYYY

☒ Operating a business

\$ 4,640,969.00

☐ Other \_\_\_\_\_

**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None

Description of sources of revenue

Gross revenue from each source  
(before deductions and exclusions)

From the beginning of the fiscal year to filing date: From \_\_\_\_\_ to Filing date  
MM / DD / YYYY

\_\_\_\_\_ \$ \_\_\_\_\_

For prior year: From \_\_\_\_\_ to \_\_\_\_\_  
MM / DD / YYYY MM / DD / YYYY

\_\_\_\_\_ \$ \_\_\_\_\_

For the year before that: From \_\_\_\_\_ to \_\_\_\_\_  
MM / DD / YYYY MM / DD / YYYY

\_\_\_\_\_ \$ \_\_\_\_\_

Debtor Shaver Motors of Allen County, Inc.  
Name

Case number (if known) \_\_\_\_\_

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____
3.2. Creditor's name _____ Street _____ City _____ State _____ ZIP Code _____	_____	\$ _____	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other _____

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. Insider's name _____ Street _____ City _____ State _____ ZIP Code _____  Relationship to debtor _____	_____	\$ _____	_____
4.2. Insider's name _____ Street _____ City _____ State _____ ZIP Code _____  Relationship to debtor _____	_____	\$ _____	_____

Debtor Shaver Motors of Allen County, Inc.  
Name

Case number (if known) \_\_\_\_\_

**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Description of the property	Date	Value of property
5.1. DSC - Nextgear <small>Creditor's name</small> c/o Michael G. Gison, Esq. <small>Street</small> 1320 City Center Dr., Suite 100 Carmel IN 46032 <small>City State ZIP Code</small>	Floor Plan Inventory Sold at Auction		\$ 50,000.00
5.1. AFC Automotive Financial Corp. <small>Creditor's name</small> 11115 Industriplex Blvd., Ste. 400 <small>Street</small> Baton Rouge LA 70809 <small>City State ZIP Code</small>	Floor Plan Inventory Sold at Auction		\$ 50,000.00

**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
Creditor's name Street City State ZIP Code			\$ _____
Last 4 digits of account number: XXXX- _ _ _ _			

**Part 3: Legal Actions or Assignments****7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None

Case title	Nature of case	Court or agency's name and address	Status of case
7.1. See Attachment 1 Case number 29-D03-1702-CC-1051	Civil Collection	Hamilton Superior Court <small>Name</small> Street City State ZIP Code	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. See Attachment 2 Case number 02D03-1702-SC-906	Small Claims Matter	Allen Superior Court <small>Name</small> 1 W. Superior St. <small>Street</small> Fort Wayne IN 46802 <small>City State ZIP Code</small>	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

See Attachment 3

Debtor Shaver Motors of Allen County, Inc.  
Name

Case number (if known) \_\_\_\_\_

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Custodian's name and address

Description of the property

Value

Custodian's name

Case title

Court name and address

Street

Name

City

State

ZIP Code

Case number

Street

Date of order or assignment

City

State

ZIP Code

**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**☒ None

Recipient's name and address

Description of the gifts or contributions

Dates given

Value

9.1. Recipient's name

Street

City

State

ZIP Code

Recipient's relationship to debtor

9.2. Recipient's name

Street

City

State

ZIP Code

Recipient's relationship to debtor

**Part 5: Certain Losses****10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred

Amount of payments received for the loss

Date of loss

Value of property lost

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).

\$

Debtor Shaver Motors of Allen County, Inc.  
Name

Case number (if known) \_\_\_\_\_

**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.1.	<u>Adam L. Hand</u>	_____	<u>5/15/17</u>	<u>\$ 2,500.00</u>
	<b>Address</b>	_____		
	<u>201 W. Wayne St.</u>	_____		
	Street			
	<u>Fort Wayne</u> <u>IN</u> <u>46802</u>			
	City State ZIP Code			
	<b>Email or website address</b>			
	_____			
	<b>Who made the payment, if not debtor?</b>			
	<u>Terri Shaver</u>			

	Who was paid or who received the transfer?	If not money, describe any property transferred	Dates	Total amount or value
11.2.	_____	_____	_____	<u>\$ _____</u>
	<b>Address</b>	_____		
	_____	_____		
	Street			
	_____			
	City State ZIP Code			
	<b>Email or website address</b>			
	_____			
	<b>Who made the payment, if not debtor?</b>			
	_____			

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
_____	_____	_____	<u>\$ _____</u>
<b>Trustee</b>	_____		
_____			



Debtor Shaver Motors of Allen County, Inc.  
Name

Case number (if known) \_\_\_\_\_

**13. Transfers not already listed on this statement**

List any transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

	Who received transfer?	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1.	_____	_____	_____	\$ _____
	<b>Address</b>			
	Street _____			
	_____			
	City _____	State _____	ZIP Code _____	
	<b>Relationship to debtor</b>			
	_____			
13.2.	_____	_____	_____	\$ _____
	<b>Address</b>			
	Street _____			
	_____			
	City _____	State _____	ZIP Code _____	
	<b>Relationship to debtor</b>			
	_____			

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

	Address	Dates of occupancy
14.1.	7923 Lima Road Street	From _____ To _____
	Fort Wayne IN 46818 City State ZIP Code	
14.2.	_____	From _____ To _____
	Street _____	
	_____	
	City _____ State _____ ZIP Code _____	

Debtor Shaver Motors of Allen County, Inc.  
Name

Case number (if known) \_\_\_\_\_

**Part 8: Healthcare Bankruptcies****15. Healthcare bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
15.1. _____ Facility name	_____	_____
_____	_____	_____
Street _____	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept?
_____	_____	Check all that apply:
City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> Electronically
		<input type="checkbox"/> Paper
15.2. _____ Facility name	_____	_____
_____	_____	_____
Street _____	Location where patient records are maintained (if different from facility address). If electronic, identify any service provider.	How are records kept?
_____	_____	Check all that apply:
City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> Electronically
		<input type="checkbox"/> Paper

**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained. \_\_\_\_\_
- Does the debtor have a privacy policy about that information?
- ☐ No
- ☐ Yes

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?
- ☐ No. Go to Part 10.
- ☐ Yes. Fill in below:

Name of plan \_\_\_\_\_

Employer identification number of the plan

EIN: \_\_\_\_\_ - \_\_\_\_\_

Has the plan been terminated?

- ☐ No
- ☐ Yes

Debtor Shaver Motors of Allen County, Inc.  
Name

Case number (if known) \_\_\_\_\_

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial institution name and address	Last 4 digits of account number	Type of account	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. _____ Name _____ Street _____ City _____ State _____ ZIP Code _____	XXXX-____-____-____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____
18.2. _____ Name _____ Street _____ City _____ State _____ ZIP Code _____	XXXX-____-____-____	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	_____	\$ _____

**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
_____ Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____ Address _____ _____	_____ _____ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
_____ Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____ Address _____ _____	_____ _____ _____	<input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor Shaver Motors of Allen County, Inc.  
Name

Case number (if known) \_\_\_\_\_

**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Owner's name and address	Location of the property	Description of the property	Value
Name			\$ _____
Street			
City State ZIP Code			

**Part 12: Details About Environmental Information**

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium)
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?** Include settlements and orders.

☒ No☐ Yes. Provide details below.

Case title	Court or agency name and address	Nature of the case	Status of case
Case number	Name		<input type="checkbox"/> Pending
	Street		<input type="checkbox"/> On appeal
	City State ZIP Code		<input type="checkbox"/> Concluded

**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

☒ No☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name	Name		
Street	Street		
City State ZIP Code	City State ZIP Code		

Debtor Shaver Motors of Allen County, Inc.  
Name

Case number (if known) \_\_\_\_\_

**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No
- ☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
Name _____	Name _____	_____	_____
Street _____	Street _____	_____	
_____	_____		
City _____ State _____ ZIP Code _____	City _____ State _____ ZIP Code _____		

**Part 13: Details About the Debtor's Business or Connections to Any Business****25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

	Business name and address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. EIN: _____ Dates business existed From _____ To _____
25.1.	Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____	_____ _____ _____ From _____ To _____
25.2.	Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____	_____ _____ _____ From _____ To _____
25.3.	Name _____ Street _____ City _____ State _____ ZIP Code _____	_____ _____ _____	_____ _____ _____ From _____ To _____

Debtor Shaver Motors of Allen County, Inc.  
Name

Case number (if known) \_\_\_\_\_

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address

Dates of service

From 08/01/1991 To \_\_\_\_\_26a.1. Swartz, Retson & Co., P.C.

Name

235 E. 86th Avenue

Street

Merrillville

City

IN

State

46410

ZIP Code

Name and address

Dates of service

From \_\_\_\_\_ To \_\_\_\_\_

26a.2.

Name

Street

City

State

ZIP Code

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

Name and address

Dates of service

From \_\_\_\_\_ To \_\_\_\_\_

26b.1.

Name

Street

City

State

ZIP Code

Name and address

Dates of service

From \_\_\_\_\_ To \_\_\_\_\_

26b.2.

Name

Street

City

State

ZIP Code

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address

If any books of account and records are  
unavailable, explain why

26c.1.

Name

Street

City

State

ZIP Code

Debtor Shaver Motors of Allen County, Inc.  
Name

Case number (if known) \_\_\_\_\_

**Name and address**If any books of account and records are  
unavailable, explain why

26c.2.

Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None**Name and address**

26d.2.

Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

**Name and address**

26d.2.

Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory

Date of  
inventoryThe dollar amount and basis (cost, market, or  
other basis) of each inventory

\_\_\_\_\_

\_\_\_\_\_

\$ \_\_\_\_\_

Name and address of the person who has possession of inventory records

27.1.

Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

Debtor Shaver Motors of Allen County, Inc.  
Name

Case number (if known) \_\_\_\_\_

Name of the person who supervised the taking of the inventory

Date of  
inventoryThe dollar amount and basis (cost, market, or  
other basis) of each inventory

\$ \_\_\_\_\_

Name and address of the person who has possession of inventory records

27.2.

Name

Street

City

State

ZIP Code

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name

Address

Position and nature of any interest

% of interest, if any

John B. Shaver

1726 Prestwick Lane, Fort Wayne, IN 46814

100

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No☐ Yes. Identify below.

Name

Address

Position and nature of  
any interestPeriod during which  
position or interest was  
held

From \_\_\_\_\_ To \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

From \_\_\_\_\_ To \_\_\_\_\_

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☒ No☐ Yes. Identify below.

Name and address of recipient

Amount of money or  
description and value of  
property

Dates

Reason for  
providing the value

30.1.

Name

Street

City

State

ZIP Code

Relationship to debtor



Debtor Shaver Motors of Allen County, Inc.  
Name

Case number (if known) \_\_\_\_\_

## Name and address of recipient

Name \_\_\_\_\_

Street \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP Code \_\_\_\_\_

Relationship to debtor \_\_\_\_\_

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

☒ No☐ Yes. Identify below.

Name of the parent corporation \_\_\_\_\_

Employer identification number of the parent corporation

EIN: \_\_\_\_\_ - \_\_\_\_\_

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

☒ No☐ Yes. Identify below.

Name of the pension fund \_\_\_\_\_

Employer identification number of the pension fund

EIN: \_\_\_\_\_ - \_\_\_\_\_

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on

7/10/17  
MM / DD / YYYY

X

Signature of individual signing on behalf of the debtor

Printed name John B. ShaverPosition or relationship to debtor PresidentAre additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?☒ No☐ Yes

Attachment

Debtor: Shaver Motors of Allen County, Inc. Case No:

Attachment 1

Nextgear Capital v. Shaver Motors of Allen County, Inc., et al.

Attachment 2

Stelzer's Power Wash v. Shaver Motors and John Shaver

Attachment 3

Case Title: Hires Parts Service, Inc.

Case Number: 02D09-1702-PL-000062

Nature of Case: Civil Plenary

Court or Agency's Name Allen Superior court

Status of Case: Pending

Case Title: In the Matter of Shaver Motors of Allen County, Inc.

Case Number: DLR-1702-0030

Nature of Case: Petition for Order of Revocation

Court or Agency's Name State of Indiana Office of the Secretary of State Auto Dealer  
Services Division

Status of Case: Pending

UNITED STATES BANKRUPTCY COURT  
Northern District of Indiana

In re: **Shaver Motors of Allen County, Inc.**

Case No. \_\_\_\_\_

Chapter **7**

**BUSINESS INCOME AND EXPENSES**

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

PART A - GROSS BUSINESS INCOME FOR PREVIOUS 12 MONTHS:

1. Gross Income For 12 Months Prior to Filing: \$ \_\_\_\_\_

PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

2. Gross Monthly Income: \$ \_\_\_\_\_

PART C - ESTIMATED FUTURE MONTHLY EXPENSES:

3. Net Employee Payroll (Other Than Debtor) \$ \_\_\_\_\_

4. Payroll Taxes N/A

5. Unemployment Taxes \_\_\_\_\_

6. Worker's Compensation \_\_\_\_\_

7. Other Taxes \_\_\_\_\_

8. Inventory Purchases (Including raw materials) \_\_\_\_\_

9. Purchase of Feed/Fertilizer/Seed/Spray \_\_\_\_\_

10. Rent (Other than debtor's principal residence) \_\_\_\_\_

11. Utilities \_\_\_\_\_

12. Office Expenses and Supplies \_\_\_\_\_

13. Repairs and Maintenance \_\_\_\_\_

14. Vehicle Expenses \_\_\_\_\_

15. Travel and Entertainment \_\_\_\_\_

16. Equipment Rental and Leases \_\_\_\_\_

17. Legal/Accounting/Other Professional Fees \_\_\_\_\_

18. Insurance \_\_\_\_\_

19. Employee Benefits (e.g., pension, medical, etc.) \_\_\_\_\_

20. Payments to Be Made Directly By Debtor to Secured Creditors For  
Pre-Petition Business Debts (Specify): \_\_\_\_\_

21. Other (Specify): \_\_\_\_\_

22. Total Monthly Expenses (Add items 3 - 21) \$ **0.00**

PART D - ESTIMATED AVERAGE NET MONTHLY INCOME:

23. AVERAGE NET MONTHLY INCOME (Subtract Item 22 from Item 2) \$ **0.00**

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF INDIANA**

In Re:

Case No.

Shaver Motors of Allen County, Inc.

Debtor(s)

**DECLARATION RE: ELECTRONIC FILING OF  
PETITION, SCHEDULES & STATEMENTS**

**PART I - DECLARATION OF PETITIONER  
Shaver Motors of Allen County,**

I (WE) Inc., the undersigned debtor(s), **hereby declare under penalty of perjury** that the information provided in the electronically filed petition, statements, and schedules is true and correct and that I signed these documents prior to electronic filing. I consent to my attorney sending my petition, statements and schedules to the United States Bankruptcy Court. I understand that this DECLARATION RE: ELECTRONIC FILING is to be executed at the First Meeting of Creditors and filed with the Trustee. I understand that failure to file the signed and dated original of this DECLARATION may cause my case to be dismissed pursuant to 11 U.S.C. § 707(a)(3) without further notice. I (we) further declare under penalty of perjury that I (we) signed the original Statement of Social Security Number (s), (Official Form B21), prior to the electronic filing of the petition and have verified the 9-digit social security number displayed on the Notice of Meeting of Creditors to be accurate.

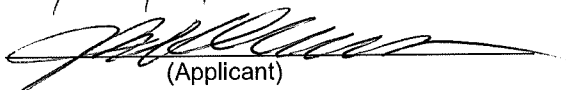
☐ If petitioner is an individual whose debts are primarily consumer debts and who has chosen to file under a chapter: I am aware that I may proceed under chapter 7, 11, 12 or 13 of Title 11, United States Code, understand the relief available under each chapter, and choose to proceed under this chapter. I request relief in accordance with the chapter specified in this petition. I (WE) and, the undersigned debtor(s), **hereby declare under penalty of perjury** that the information provided in the electronically filed petition, statements, and schedules is true and correct.

☒ If petitioner is a corporation or partnership: I declare under a penalty of perjury that the information provided in the electronically filed petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter specified in this petition.

☐ If petitioner files an application to pay filing fees in installments: I certify that I completed an application to pay the filing fee in installments. I am aware that if the fee is not paid within 120 days of the filing date of filing the petition, the bankruptcy case may be dismissed and, if dismissed, I may not receive a discharge of my debts.

Dated: 7/10/17

Signed:

  
(Applicant)

(Joint Applicant)

**PART II - DECLARATION OF ATTORNEY**

I **declare under penalty of perjury** that the debtor(s) signed the petition, schedules, statements, etc., including the Statement of Social Security Number(s) (Official Form B21) before I electronically transmitted the petition, schedules, and statements to the United States Bankruptcy Court, and have followed all other requirements in Administrative Orders and Administrative Procedures, including submission of the electronic entry of the debtor(s) Social Security number into the Court's electronic records. If an individual, I further declare that I have informed the petitioner (if an individual) that [he or she] may qualify to proceed under chapter 7, 11, 12 or 13 of Title 11, United States Code, and have explained the relief available under each chapter. This declaration is based on the information of which I have knowledge.

Dated: 7/10/17

Attorney for Debtor(s)

  
Adam L. Hand

Address of Attorney

201 W. Wayne Street  
Fort Wayne, Indiana 46802

UNITED STATES BANKRUPTCY COURT  
Northern District of Indiana

In re:

Case No. BKY

Shaver Motors of Allen County, Inc.,

Debtor(s)

Chapter 7 Case

STATEMENT REGARDING AUTHORITY TO SIGN AND FILE PETITION

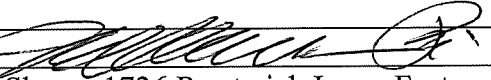
I, John B. Shaver, declare under penalty of perjury that I am the President of Shaver Motors of Allen County, Inc., a Indiana corporation and that on the following resolution was duly adopted by the of this corporation:

"Whereas, it is in the best interest of this corporation to file a voluntary petition in the United States Bankruptcy Court pursuant to Chapter 7 of Title 11 of the United States Code;

Be It Therefore Resolved, that John B. Shaver, President of this corporation, is authorized and directed to execute and deliver all documents necessary to perfect the filing of a chapter 7 voluntary bankruptcy case on behalf of the corporation; and

Be It Further Resolved, that John B. Shaver, President of this corporation, is authorized and directed to appear in all bankruptcy proceedings on behalf of the corporation, and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the corporation in connection with such bankruptcy case; and

Be It Further Resolved, that John B. Shaver, President of this corporation, is authorized and directed to employ Adam L. Hand, attorney and the law firm of Beckman Lawson, LLP to represent the corporation in such bankruptcy case."

Executed on: 7/10/17	Signed: 
	John B. Shaver 1726 Prestwick Lane, Fort Wayne, IN 46814 (Name and Address of Subscriber)

**United States Bankruptcy Court**  
Northern District of Indiana

In re **Shaver Motors of Allen County,  
Inc.**

Case No.

Debtor.

Chapter 7

**STATEMENT OF CORPORATE OWNERSHIP**

Comes now **Shaver Motors of Allen County, Inc.** (the "Debtor") and pursuant to Fed. R. Bankr. P. 1007(a) and 7007.1 state as follows:

\_\_\_\_ All corporations that directly or indirectly own 10% or more of any class of the corporation's equity interests are listed below:

OR,

**X** There are no entities to report.



By: \_\_\_\_\_

**Adam L. Hand**  
Signature of Attorney

Counsel for  
Bar no.: **25620-02**  
Address.: **201 W. Wayne Street**  
**Fort Wayne, Indiana 46802**

Telephone No.: **(260) 422-0800**  
Fax No.: **(260) 420-1013**  
E-mail address: **ahand@beckmanlawson.com**

**UNITED STATES BANKRUPTCY COURT  
Northern District of Indiana**

**STATEMENT OF INFORMATION REQUIRED BY 11 U.S.C. § 341**

**INTRODUCTION**

Pursuant to the Bankruptcy Reform Act of 1994, the Office of the United States Bankruptcy Administrator has prepared this information sheet to help you understand some of the possible consequences of filing a bankruptcy petition under chapter 7 of the Bankruptcy Code. This information is intended to make you aware of -

- (1) the potential consequences of seeking a discharge in bankruptcy, including the effects on credit history;
- (2) the effect of receiving a discharge of debts in bankruptcy;
- (3) the effect of reaffirming a debt; and
- (4) your ability to file a petition under a different chapter of the Bankruptcy Code.

There are many other provisions of the Bankruptcy Code that may affect your situation. This statement contains only general principles of law and is not a substitute for legal advice. If you have any questions or need further information as to how the bankruptcy laws apply to your specific case, you should consult with your lawyer.

**WHAT IS A DISCHARGE?**

The filing of a chapter 7 petition is designed to result in a discharge of most of the debts you listed in your bankruptcy schedules. A discharge is a court order that says that you do not have to repay your debts, but there are a number of exceptions. Debts which usually may not be discharged in your chapter 7 case include, for example, most taxes, child support, alimony, and student loans; court-ordered fines and restitution; debts obtained through fraud or deception; debts which were not listed in your bankruptcy schedules; and personal injury debts caused by driving while intoxicated or taking drugs. Your discharge may be denied entirely if you, for example, destroy or conceal property; destroy, conceal or falsify records; or make a false oath. Creditors cannot ask you to repay debts which have been discharged. You can only receive a chapter 7 discharge once every eight (8) years.

**WHAT ARE THE POTENTIAL EFFECTS OF A DISCHARGE?**

The fact that you filed bankruptcy can appear on your credit report for as long as 10 years. Thus, filing a bankruptcy petition may affect your ability to obtain credit in the future. Also, you may not be excused from repaying debts that were not listed on your bankruptcy schedules or that you incurred after you filed bankruptcy. There are exceptions to this general statement. See your lawyer if you have questions.

**WHAT ARE THE EFFECTS OF REAFFIRMING A DEBT?**

After you file your bankruptcy petition, a creditor may ask you to reaffirm a certain debt or you may seek to do so on your own. Reaffirming a debt means that you sign and file with the court a legally enforceable document which states that you promise to repay all or a portion of the debt that may otherwise have been discharged in your bankruptcy case. Reaffirmation agreements must generally be filed with the court sixty (60) days after the first meeting of creditors.

Reaffirmation agreements are strictly voluntary. They are not required by the Bankruptcy Code or other state or federal law. You can voluntarily repay any debt instead of signing a reaffirmation agreement, but there may be valid reasons for wanting to reaffirm a particular debt. This is particularly true when property you wish to retain is collateral for a debt.

Reaffirmation agreements must not impose an undue burden on you or your dependents and must be in your best interest. If you decide to sign a reaffirmation agreement, you may cancel it at any time before the court issues an order of discharge or within sixty (60) days after you filed the reaffirmation agreement with the court, whichever is later.

If you reaffirm a debt and fail to make the payments as required in the reaffirmation agreement, the creditor can take action against you to recover any property that was given as security for the loan and you may remain personally liable for any deficiency. In addition, creditors may seek other remedies, such as garnishment of wages.

**OTHER BANKRUPTCY OPTIONS**

You have a choice in deciding what chapter of the Bankruptcy Code will best suit your needs. Even if you have already filed for relief under chapter 7, you may be eligible to convert your case to a different chapter.

Chapter 7 is the liquidation chapter of the Bankruptcy Code. Under chapter 7, a trustee is appointed to collect and sell, if economically feasible, all property you own that is not exempt from these actions.

Chapter 11 is the reorganization chapter most commonly used by businesses, but it is also available to individuals. Creditors vote on whether to accept or reject a plan, which also must be approved by the court. While the debtor normally remains in control of the assets, the court can order the appointment of a trustee to take possession and control of the business.

Chapter 12 offers bankruptcy relief to those who qualify as family farmers. Family farmers must propose a plan to repay their creditors over a three-to-five year period and it must be approved by the court. Plan payments are made through a chapter 12 trustee, who also monitors the debtors' farming operations during the pendency of the plan.

Finally, chapter 13 generally permits individuals to keep their property by repaying creditors out of their future income. Each chapter 13 debtor writes a plan which must be approved by the bankruptcy court. The debtors must pay the chapter 13 trustee the amount set forth in their plan. Debtors receive a discharge after they complete their chapter 13 repayment plan. Chapter 13 is only available to individuals with regular income whose debts do not exceed \$1,000,000 (\$250,000 in unsecured debts and \$750,000 in secured debts).

AGAIN, PLEASE SPEAK TO YOUR LAWYER IF YOU NEED FURTHER INFORMATION OR EXPLANATION, INCLUDING HOW THE BANKRUPTCY LAWS RELATE TO YOUR SPECIFIC CASE.

By signing below, I/we acknowledge that I/we have received a copy of this document, and that I/we have had an opportunity to discuss the information in this document with an attorney of my/our choice.

Date

7/10/17

  
\_\_\_\_\_  
**Shayer Motors of Allen County, Inc.**

\_\_\_\_\_  
\_\_\_\_\_



**WRITTEN NOTICE REQUIRED UNDER SECTION 527(a)(2)**

All information that you are required to provide with a petition and thereafter during a case under title 11 ("Bankruptcy") of the United States Code is required to be complete, accurate, and truthful.

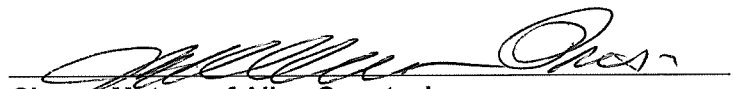
All assets and all liabilities are required to be completely and accurately disclosed in the documents filed to commence the case, and the replacement value of each asset as defined in title 11 United States Code section 506 must be stated in those documents where requested after reasonable inquiry to establish such value.

Current monthly income, the amounts specified in section 707(b)(2), and, in a case under chapter 13 of title 11, disposable income (determined in accordance with section 707(b)(2)), are required to be stated after reasonable inquiry.

Information that you provide during your case may be audited pursuant to title 11. Failure to provide such information may result in dismissal of the case under title 11 or other sanction, including criminal sanctions.

Date

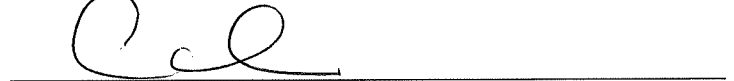
7/10/17



**Shaver Motors of Allen County, Inc.**

Debtor

Joint Debtor



**Adam L. Hand**

Attorney for Debtor(s)

**IMPORTANT INFORMATION ABOUT BANKRUPTCY ASSISTANCE  
SERVICES FROM AN ATTORNEY OR BANKRUPTCY PETITION PREPARER**

If you decide to seek bankruptcy relief, you can represent yourself, you can hire an attorney to represent you, or you can get help in some localities from a bankruptcy petition preparer who is not an attorney. THE LAW REQUIRES AN ATTORNEY OR BANKRUPTCY PETITION PREPARER TO GIVE YOU A WRITTEN CONTRACT SPECIFYING WHAT THE ATTORNEY OR BANKRUPTCY PETITION PREPARER WILL DO FOR YOU AND HOW MUCH IT WILL COST. Ask to see the contract before you hire anyone.

The following information helps you understand what must be done in a routine bankruptcy case to help you evaluate how much service you need. Although bankruptcy can be complex, many cases are routine.

Before filing a bankruptcy case, either you or your attorney should analyze your eligibility for different forms of debt relief available under the Bankruptcy Code and which form of relief is most likely to be beneficial for you. Be sure you understand the relief you can obtain and its limitations. To file a bankruptcy case, documents called a Petition, Schedules and Statement of Financial Affairs, as well as in some cases a Statement of Intention need to be prepared correctly and filed with the bankruptcy court. You will have to pay a filing fee to the bankruptcy court. Once your case starts, you will have to attend the required first meeting of creditors where you may be questioned by a court official called a "trustee" and by creditors.

If you choose to file a chapter 7 case, you may be asked by a creditor to reaffirm a debt. You may want help deciding whether to do so. A creditor is not permitted to coerce you into reaffirming your debts.

If you choose to file a chapter 13 case in which you repay your creditors what you can afford over 3 to 5 years, you may also want help with preparing your chapter 13 plan and with the confirmation hearing on your plan which will be before a bankruptcy judge.

If you select another type of relief under the Bankruptcy Code other than chapter 7 or chapter 13, you will want to find out what should be done from someone familiar with that type of relief.


Your bankruptcy case may also involve litigation. You are generally permitted to represent yourself in litigation in bankruptcy court, but only attorneys, not bankruptcy petition preparers, can give you legal advice.

Date

7/10/17

  
**Shaver Motors of Allen County, Inc.**  
Debtor

Joint Debtor

  
**Adam L. Hand**  
Attorney for Debtor(s)

UNITED STATES BANKRUPTCY COURT  
Northern District of Indiana

In re: **Shaver Motors of Allen County, Inc.**

Debtors

Case No. \_\_\_\_\_

Chapter 7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s), or debtor's attorney if applicable, do hereby certify under penalty of perjury that the attached Master Mailing List of creditors is complete, correct and consistent with the debtor's schedules pursuant to Local Bankruptcy Rules and I/we assume all responsibility for errors and omissions.

Dated: \_\_\_\_\_

7/10/17

Signed: \_\_\_\_\_

[Signature]

Dated: \_\_\_\_\_

Signed: \_\_\_\_\_

Signed: \_\_\_\_\_

[Signature]

**Adam L. Hand**  
**Attorney for Debtor(s)**  
**Bar no.: 25620-02**  
**201 W. Wayne Street**  
**Fort Wayne, Indiana 46802**  
**Telephone No: (260) 422-0800**  
**Fax No: (260) 420-1013**

**E-mail address:**  
**ahand@beckmanlawson.com**

AEP Indiana Michigan Power  
c/o Convergent  
800300 30th St.  
P.O. Box 9004  
Renton, WA 98057

AFC Automotive Financial Corp.  
11115 Industriplex Blvd., Ste. 400  
Baton Rouge, LA 70809

American Express  
P.O. Box 650448  
Dallas, TX 75265-0448

AmTrust North American  
P.O. Box 93833  
Cleveland, OH 44101

Bank of America  
P.O. Box 851001  
Dallas, TX 75285-1001

Carfax  
c/o Barr Credit Service  
5151 E. Broadway Blvd., Suite 800  
Tucson, AZ 85711

Cars.com  
c/o Classified Ventures, LLC  
2631 Solution Center Drive  
Chicago, IL 60677-2006

Cross Sell, LLC  
c/o Credit Bureau Sysems, Inc.  
P.O. Box 11788  
Lexington, KY 40578-1788

Discover  
P.O. Box 6103  
Carol Stream, IL 60197-6103

DSC-Nextgear  
c/o Michael G. Gibson, Esq.  
320 City Center Cr., Suite 100  
Carmel, IN 46032

Fort Wayne Newspaper  
P.O. Box 74059  
Cincinnati, OH 45274-0509

Gateway One Lending & Finance  
160 N. Riverview Dr., Suite 100  
Anaheim, CA 92808

Hires Automotive Center  
1620 Northland Blvd.  
Fort Wayne, IN 46825

Indiana Department of Revenue  
100 N. Senate Avenue, #111  
Indianapolis, IN 46204

Indiana Secretary of State  
302 W. Washington St.  
Indianapolis, IN 46204

John B. Shaver  
1726 Prestwick Lane  
Fort Wayne, IN 46814

JRM Realty  
5612 Illinois Road  
Fort Wayne, IN 46804

Juniper  
Business Card Services  
P.O. Box 23066  
Columbus, GA 31902-3066

Kapp's Landscaping  
4124 Clubview Dr.  
Fort Wayne, IN 46804

Koehlinger Kruse  
1441 Wells Street  
Fort Wayne, IN 46818

KPC Media  
P.O. Box 39  
Kendallville, IN 46755

MBPI Vehicle Protection, Inc.  
250 NE Mulberry  
Lee's Summit, MO 64086

Mickey's Linen & Towel Supply  
4601 W. Addison St., Ste. 500  
Chicago, IL 60641-3702

Office Depot  
Office Depot Card Plan  
P.O. Box 689020  
Des Moines, IA 50368-9020

Protective/Asset Protection  
2345 Waukegan Road  
Suite 210  
Bannoelburn, IL 60015

Ridge Co. Automotive Group  
630 Avenue of Autos  
Fort Wayne, IN 46804

Speedway Auto Care  
219 W. Collins Road  
Fort Wayne, IN 46825

Stelzer's Mobile Power  
P.O. Bo 10252  
Fort Wayne, IN 46851

Summit City Auto Glass  
P.O. Box 15204  
Fort Wayne, IN 46885-5204

vAuto/Auto Traders  
c/o Jonathan Neil & Associates  
71 West Main St., Suite 304  
Freehold, NJ 07228

Vernon General Insurance  
P.O. Box 770  
Deerfield, IL 60015